



November 20, 2012

Ms. Grissel V. Diaz-Cotto  
Emergency and Remedial Response Division  
United States Environmental Protection Agency  
Region II  
290 Broadway, 19<sup>th</sup> Floor  
New York, NY 10007-1866

**Re: October 2012 Discharge Monitoring Report  
Leachate Treatment Plant, Operable Unit 1  
Kin-Buc Landfill Superfund Site**

Dear Ms. Diaz-Cotto:


Please find enclosed the October 2012 Discharge Monitoring Report (DMR) for the Leachate Treatment Plant of Operable Unit One at the Kin-Buc Landfill Superfund Site.

Weston & Sampson Services, Inc. would like to confirm the following:

- Weekly sampling was not conducted during the week of October 29, 2012, due to complication that arose from Hurricane Sandy. Power outages across New Jersey left both the Plant and our Contract Laboratory without power. Additionally, logistical difficulties were experienced region-wide due to the enforced State of Emergency. The Plant was offline, and there was no discharge released to the Raritan River during the week of October 29, 2012.
- Effluent parameters sampled throughout the rest of October 2012 were within permitted limits.
- The treatment plant operated well during the rest of October 2012.

Should you have any questions concerning this DMR or the Treatment Plant, please contact me at your earliest convenience at the Kin-Buc site.

Very truly yours,  
Weston & Sampson Services, Inc., on behalf of SCA Services, Inc.

  
Glenn Grich  
Plant Manager  
Enclosure

Cc: Martha Goodwin – NJDEP  
Stephen Joyce – SC Holdings, Inc.  
Carl Januszkiewicz – SC Holdings, Inc.  
John A. Bocchino, Jr. – Weston & Sampson Services, Inc.

307554



Connecticut	Rhode Island	New Hampshire	Maine	Vermont	New York	Florida
273 Dividend Road Rocky Hill, CT 06067	477B Tiogue Avenue Coventry, RI 02816	100 International Drive Suite 152 Portsmouth, NH 03801	PO Box 189 York, ME 03909	96 South Main Street Suite 2 Waterbury, VT 05676	301 Manchester Road Suite 201A Poughkeepsie, NY 12603	1990 Main Street Suite 750 Sarasota, FL 34236

*When it's essential...it's Weston&Sampson.®*

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION  
DIVISION OF WATER QUALITY

MONITORING REPORT - TRANSMITTAL SHEET

NJPDES NO.  
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\*NJ Permit Equivalent

REPORTING PERIOD  
M o. Y r.      M o. Y r.  

1	0	1	2
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1	0	1	2
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**PERMITTEE:**      Name: SCA Services, Inc.  
                         Address: 383 Meadow Road  
                                 Edison, New Jersey 08817

**FACILITY:**      Name: Kin-Buc Landfill  
                         Address: 383 Meadow Road  
                                 Edison, New Jersey 08817  
                         Telephone: 732-572-4743

FORMS ATTACHED (Indicate Quantity of Each)

Operating Exceptions

**SLUDGE REPORT-SANITARY**  
\_\_ T-VWX-007 \_\_ T-VWX-008 \_\_ T-VWX-009  
\_\_ EPA Form 3320-1

DYE TESTING      YES NO  
                                 \_\_ X

**SLUDGE REPORT-INDUSTRIAL**  
\_\_ T-VWX-010A \_\_ T-VWX-010B

TEMPORARY BYPASSING      \_\_ X

DISINFECTION INTERRUPTION      \_\_ X

**WASTEWATER REPORTS**  
\_\_ T-VWX-011 \_\_ T-VWX-012 \_\_ T-VWX-013

MONITORING MALFUNCTIONS      \_\_ X

UNITS OF OPERATION      \_\_ X

**GROUNDWATER REPORTS**  
\_\_ T-VWX-015(A,B) \_\_ T-VWX-016 \_\_ T-VWX-017  
\_\_ ELECTRONIC SUBMISSION

OTHER      \_\_ X

**NPDES DISCHARGE MONITORING**  
1 EPA Form 3320-1

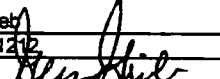
(Detail any "Yes" on reverse side in appropriate space.)

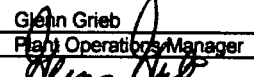
**NOTE:** The "Hours Attended at Plant" on the reverse of this sheet must also be completed.

**AUTHENTICATION** I certify under penalty of law that this document and all attachments were prepared under the direction or supervision in accordance with a system designed to assure my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

**LICENSED OPERATOR**

**PRINCIPAL EXECUTIVE OFFICER OR  
DULY AUTHORIZED REPRESENTATIVE**

Name (Printed) Glenn Grieb  
Grade & Registry No. N-4 : 0021212  
Signature 

Name (Printed) Glenn Grieb  
Title (Printed) Plant Operations Manager  
Signature 

Date      October 14, 2012

[illegible]

MONTH 

1	0
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 YEAR 

1	2
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1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
0	0	0	9	8	0	4	8	4	4	4	0	0	2	8	8
14	14	12	12	12	4	0	13	13	13	13	8	0	2	16	8
17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
8.5	8	0	0	2	8	6	8	8	4	4	3	0	2	8	
12	12	12	4	3	8	12	12	12	12	4	0	8	8	8	

PERMITTEE NAME/ADDRESS

NAME  
ADDRESS

FACILITY  
LOCATION

SCA SERVICES, INC.  
383 MEADOW ROAD  
EDISON, NEW JERSEY 08817

KIN-BUC LANDFILL  
EDISON, NEW JERSEY  
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM  
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT  
PERMIT NUMBER

001  
DISCHARGE NUMBER

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
12	10	01	12	10	31

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	0.025155	0.034386	MGD	*****	*****	*****	***	***	continuous	flow meter
	PERMIT REQUIREMENT	REPORT	ONLY		*****	*****	*****			continuous	flow meter
pH	SAMPLE MEASUREMENT	*****	*****	***	8.22	*****	8.41	S.U.	0	1/week	grab
	PERMIT REQUIREMENT	*****	*****		6.0	*****	9.0			weekly	grab
PETROLEUM HYDROCARBONS	SAMPLE MEASUREMENT	*****	*****	***	*****	0.36	0.5	mg/l	0	2/month	grab
	PERMIT REQUIREMENT	*****	*****		*****	10	16			2/month	grab
COD	SAMPLE MEASUREMENT	25.88	26.81	kg/day	*****	250	256	mg/l	0	2/month	comp.
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT	ONLY			2/month	comp.
BOD	SAMPLE MEASUREMENT	*****	*****	***	*****	<1.3	<1.3	mg/l	0	2/month	comp.
	PERMIT REQUIREMENT	*****	*****		*****	56	220			2/month	comp.
TOTAL SUSPENDED SOLIDS	SAMPLE MEASUREMENT	0.24	0.30	kg/day	*****	2.30	3.00	mg/l	0	1/week	comp.
	PERMIT REQUIREMENT	REPORT	ONLY		*****	30	45(1)			weekly	comp.
DISSOLVED OXYGEN	SAMPLE MEASUREMENT	*****	*****	***	6.60	*****	*****	mg/l	0	1/week	grab
	PERMIT REQUIREMENT	*****	*****		4.0 MIN instantaneous	*****	*****			weekly	grab
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)					TELEPHONE		DATE		
Glenn Grieb Project Manager							732 572-4743		12 11 14		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR MO DAY		

COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS

(REFERENCE ALL ATTACHMENTS HERE)

PERMITTEE NAME/ADDRESS

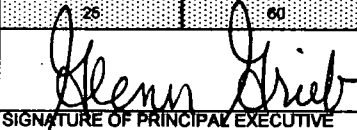
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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM  
DISCHARGE MONITORING REPORT

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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
BENZENE	SAMPLE MEASUREMENT	<0.0000084	<0.0000086	kg/day	*****	<0.08	<0.08	ug/L	0	2/month	grab	
	PERMIT REQUIREMENT	0.008	0.02		*****	57	134			2/month	grab	
CHLOROBENZENE	SAMPLE MEASUREMENT	<0.0000149	<0.0000183	kg/day	*****	<0.15	<0.18	ug/L	0	2/month	grab	
	PERMIT REQUIREMENT	0.022	0.058		*****	142	380			2/month	grab	
1,1 DICHLOROETHENE	SAMPLE MEASUREMENT	<0.0000134	<0.0000136	kg/day	*****	<0.13	<0.13	ug/L	0	2/month	grab	
	PERMIT REQUIREMENT	0.003	0.009		*****	22	58			2/month	grab	
ETHYLBENZENE	SAMPLE MEASUREMENT	<0.0000103	<0.0000105	kg/day	*****	<0.10	<0.10	ug/L	0	2/month	grab	
	PERMIT REQUIREMENT	0.022	0.058		*****	142	380			2/month	grab	
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT	<0.0000103	<0.0000105	kg/day	*****	<0.10	<0.10	ug/L	0	2/month	grab	
	PERMIT REQUIREMENT	0.008	0.025		*****	52	184			2/month	grab	
TOLUENE	SAMPLE MEASUREMENT	<0.0000155	<0.0000157	kg/day	*****	<0.15	<0.15	ug/L	0	2/month	grab	
	PERMIT REQUIREMENT	0.004	0.011		*****	28	74			2/month	grab	
1,2-TRANSDICHLOROETHYLENE	SAMPLE MEASUREMENT	<0.0000134	<0.0000136	kg/day	*****	<0.13	<0.13	ug/L	0	2/month	grab	
	PERMIT REQUIREMENT	0.004	0.009		*****	26	60			2/month	grab	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE	
Glenn Grieb Project Manager									732 572-4743		12 11 14	
TYPED OR PRINTED							AREA CODE		NUMBER		YEAR MO DAY	
COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS		(REFERENCE ALL ATTACHMENTS HERE)										

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KIN-BUC LANDFILL  
EDISON, NEW JERSEY  
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM  
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT			001			
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MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
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PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TRICHLOROETHYLENE	SAMPLE MEASUREMENT	<0.0000093	<0.0000094	kg/day	*****	<0.09	<0.09	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.004	0.010		*****	28	89			2/month	grab
VINYL CHLORIDE	SAMPLE MEASUREMENT	<0.0000150	<0.0000159	kg/day	*****	<0.14	<0.14	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	0.008	0.018		*****	52.8	108			weekly	grab
ACENAPHTHYLENE	SAMPLE MEASUREMENT	<0.0000051	<0.0000065	kg/day	*****	<0.050	<0.084	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00926	0.00952		*****	1.72	3.43			monthly	grab
BENZO(A)ANTHRACENE	SAMPLE MEASUREMENT	<0.0000065	<0.0000082	kg/day	*****	<0.06	<0.06	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00926	0.00952		*****	1.72	3.43			monthly	grab
BENZO(A)PYRENE	SAMPLE MEASUREMENT	<0.0000088	<0.0000112	kg/day	*****	<0.086	<0.110	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00926	0.00952		*****	1.72	3.43			monthly	grab
BENZO(ghi)PERYLENE	SAMPLE MEASUREMENT	<0.0000154	<0.0000193	kg/day	*****	<0.150	<0.190	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00926	0.00952		*****	1.72	3.43			monthly	grab
BENZO(k)FLUORANTHENE	SAMPLE MEASUREMENT	<0.0000064	<0.0000080	kg/day	*****	<0.062	<0.079	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00926	0.00952		*****	1.72	3.43			monthly	grab
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TYPED OR PRINTED						Glenn Grieb		732 572-4743		12 11 14	
COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS						OFFICER OR AUTHORIZED AGENT		AREA CODE NUMBER		YEAR MO DAY	

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PERMITTEE NAME/ADDRESS  
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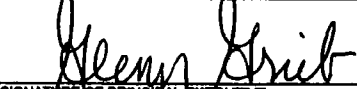
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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM  
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT			001			
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PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
IDENO(1,2,3cd) PYRENE	SAMPLE MEASUREMENT	<0.0000283	<0.0000356	kg/day	*****	<0.275	<0.350	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00028	0.00052		*****	1.72	3.43			monthly	grab
PHENANTHRENE	SAMPLE MEASUREMENT	<0.0000856	<0.0003528	kg/day	*****	0.8	3.1	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	5.4(2)			weekly	grab
ALDRIN	SAMPLE MEASUREMENT	<0.0000011	<0.0000012	kg/day	*****	<0.011	<0.011	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.000133	0.00026		*****	0.0875	0.176			monthly	grab
4,4-DDT	SAMPLE MEASUREMENT	<0.0000012	<0.0000013	kg/day	*****	<0.011	<0.012	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	0.0000578	0.000148		*****	0.36	0.786			weekly	grab
PCB-1242	SAMPLE MEASUREMENT	<0.0000177	<0.0000186	kg/day	*****	<0.17	<0.17	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.6(2)			weekly	grab
PCB-1248	SAMPLE MEASUREMENT	<0.0000231	<0.0000241	kg/day	*****	<0.22	<0.22	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.6(2)			weekly	grab
PCB-1254	SAMPLE MEASUREMENT	<0.0000145	<0.0000153	kg/day	*****	<0.14	<0.14	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.6(2)			weekly	grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)		TELEPHONE		DATE	
Glenn Grieb Project Manager			732	572-4743	12	11
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY
COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS	(REFERENCE ALL ATTACHMENTS HERE)					

PERMITTEE NAME/ADDRESS  
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FACILITY  
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383 MEADOW ROAD  
EDISON, NEW JERSEY 08817  
  
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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM  
DISCHARGE MONITORING REPORT

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PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
PCB-1260	SAMPLE MEASUREMENT	<0.0000134	<0.0000142	kg/day	*****	<0.13	<0.13	ug/L	0	1/week	grab	
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab	
ARSENIC	SAMPLE MEASUREMENT	0.0005240	0.0008894	kg/day	*****	4.90	8.30	ug/L	0	1/week	comp	
	PERMIT REQUIREMENT	0.013	0.028		*****	85.8	172			weekly	comp	
CADMIUM	SAMPLE MEASUREMENT	<0.0000956	<0.0001013	kg/day	*****	0.9	0.9	ug/L	0	1/week	comp	
	PERMIT REQUIREMENT	0.9073	0.017		*****	46.2	152			weekly	comp	
CHROMIUM	SAMPLE MEASUREMENT	0.0004726	0.0005008	kg/day	*****	4.40	4.40	ug/L	0	1/week	comp	
	PERMIT REQUIREMENT	0.036	0.060		*****	198	386			weekly	comp	
COPPER	SAMPLE MEASUREMENT	0.0008181	0.0007776	kg/day	*****	5.8	7.7	ug/L	0	1/week	comp	
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	10			weekly	comp	
LEAD	SAMPLE MEASUREMENT	0.0003842	0.0005236	kg/day	*****	3.58	4.70	ug/L	0	1/week	comp	
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	10			weekly	comp	
NICKEL	SAMPLE MEASUREMENT	0.0037342	0.0039836	kg/day	*****	34.8	36.0	ug/L	0	1/week	comp	
	PERMIT REQUIREMENT	0.146	0.281		*****	323	1850			weekly	comp	
NAME/TITLE: PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				SIGNATURE OF PRINCIPAL/EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE		
Glenn Grieb Project Manager								732	572-4743	12	11	14
TYPED OR PRINTED								AREA CODE	NUMBER	YEAR	MO	DAY

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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
ZINC	SAMPLE MEASUREMENT	0.0006893	0.0006032	kg/day	*****	5.3	5.3	ug/L	0	1/week	comp	
	PERMIT REQUIREMENT	0.177	0.358		*****	1.178	2550			weekly	comp	
CYANIDE	SAMPLE MEASUREMENT	<0.0002095	<0.0002954	kg/day	*****	2.0	2.7	ug/L	0	1/week	comp	
	PERMIT REQUIREMENT	0.002	0.004		*****	19.2	28.4			weekly	comp	
ALUMINUM	SAMPLE MEASUREMENT	0.0068924	0.0142301	kg/day	*****	91.0	140.0	ug/L	0	1/week	comp	
	PERMIT REQUIREMENT	1.48	2.81		*****	9246	18500			weekly	comp	
IRON	SAMPLE MEASUREMENT	0.0068999	0.0092181	kg/day	*****	81.0	81.0	ug/L	0	1/week	comp	
	PERMIT REQUIREMENT	80.8	182		*****	532000	1070000			weekly	comp	
ACUTE TOXICITY, (LC50)	SAMPLE MEASUREMENT	QUARTELY	REPORT	---	n/a	*****	*****	%	0			
	PERMIT REQUIREMENT	*****	*****		50(3)	*****	*****			see permit	equivalent	
Ammonia	SAMPLE MEASUREMENT	*****	*****	---	*****	0.140	0.150	mg/l	0	*****	*****	
	PERMIT REQUIREMENT	*****	*****		*****	4.9	10.0			2/month	comp	
	SAMPLE MEASUREMENT	*****	*****	---	*****	*****	*****	---	---	*****	*****	
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****			*****	*****	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and am familiar with the information submitted herein and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE		
Glenn Grieb Project Manager								732	572-4743	12	11	14
TYPED OR PRINTED						AREA CODE		NUMBER		YEAR	MO	DAY
COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS		(REFERENCE ALL ATTACHMENTS HERE)										